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(15)

No. 06-6407

Supreme Court, U.S.
FILED
FEB 2 2 2007
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In The
Supreme Court of the United States

SCOTT LOUIS PANETTI,

Petitioner,

v.

NATHANIEL QUARTERMAN, Director,
Texas Department of Criminal Justice,
Correctional Institutions Division,

Respondent.

**On Writ Of Certiorari To The
United States Court Of Appeals
For The Fifth Circuit**

JOINT APPENDIX
VOLUME II

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KEITH S. HAMPTON
1103 Nueces Street
Austin, TX 78701
(512) 476-8484
(512) 476-0953 (facsimile)

*Counsel of Record
for Petitioner*

R. TED CRUZ
Solicitor General
OFFICE OF THE
ATTORNEY GENERAL
P.O. Box 12548
Austin, TX 78711
(512) 936-1700
(512) 474-2697 (facsimile)

*Counsel of Record
for Respondent*

**Petition For A Writ Of Certiorari Filed September 6, 2006
Certiorari Granted January 5, 2007**

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State's Exhibit 3 (TDCJ Medical Records of Scott Louis Panetti – excerpts), Evidentiary Hearing in *Panetti v. Dretke*, No. 1:04-CV-042, U.S. District Court for the Western District of Texas (Sept. 7, 2004) II-1

State's Exhibit 6, Evidentiary Hearing in *Panetti v. Dretke*, No. 1:04-CV-042, U.S. District Court for the Western District of Texas (Sept. 7, 2004) II-42

CORRECTIONAL MANAGED CARE
MENTAL HEALTH SERVICES

Outpatient MH Follow-up

Patient Name: PANETTI, SCOTT L TDCJ#:999164 Date: 05/25/2004 14:15
Facility: POLUNSKY (formerly TERRELL)

Pt seen due to scheduling error.

S: The patient reports: he is a preacher and is to deliver the Word of God to those around him. Pt stated he is a born again Christian and wishes to witness to everyone....

O: Observations: Pt was hyperreligious.
Mental Status: anxious; alert and oriented in all spheres; hyperreligious; denies homicidal or suicidal ideation; tall is stature and lower average for weight; good eye contact; Pt would only speak of the Bible and God.

A: Impression: hyper-religious

P: Referral:
F/U:
Schedule Appointment:
Follow up PRN: xxx

Name of interpreter, if required:

Electronically Signed by SMITH-MUEHR, JERRIE M MS, LPC on 05/25/2004.
##And No Others##

Procedures Ordered:
MH OP FOLLOW-UP: no diagnosis on axis i/axis ii

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TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

PSYCHIATRIC CENTER JIV

DISCHARGE/RELEASE SUMMARY

PATIENT'S NAME: PANETTI, Scott TDCJ #: 999164 AGE: 39

UNIT OF ASSIGNMENT: Ellis I MED. CLASS: S3NT

DATE OF ADMISSION: 09/29/97 -10-8-97 REFERRED BY: Jester IV Crisis Management

REASON FOR ADMISSION: This patient was admitted into Jester IV Acute Care I relative to reported loose association and rambling speech. Also, he was said to be quite demanding of others. He was admitted into Jester IV Acute Care I for continued evaluation and treatment.

CLINICAL COURSE: During the course of evaluation in Jester IV Acute Care I, this patient displayed circumstantial speech. Also, he exhibited religious preoccupations. Within the structured environment that is afforded at Jester IV Acute Care I, an improvement in his ability to focus was observed. He complained of auditory and visual hallucinations; however, these were extremely vague. On 10/08/97, this patient demanded to be discharged back to Death Row because he was having trouble dealing with officers. He denied the existence of homicidal and suicidal ideation. Overall, this patient's expressed complaints were inconsistent with his clinical presentation. He was discharged at his own request against medical advice.

CURRENT MENTAL STATUS: This patient was oriented x 3. His psychomotor activity was unremarkable. No gross impairment in speech was noted. The patient's mood was euthymic with broad affect. His thoughts were coherent and goal directed. No suicidal, homicidal, or paranoid ideation was present. Intermittent auditory and visual hallucinations were reported. Delusional activity was questionable. His stream of thought was average. The patient's level of intelligence was believed to lie within the average range. All components of memory appeared to be grossly intact. His impulse control was adequate. The patient's judgement was considered to be limited. His level of insight was questionable.

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI, SCOTT L.
TDCJ No.: 999164
Unit: ELLIS

Date & Time	Notes
8/27/97 1300	Interviewed again. SCR. He says that he did not ask to see me (in particular). He says that he has been able to treat his mental problems with his "spiritual" methods. He then launches into a diatribe of his lack of treatment by this department and how it will "all become manifest." When he was told we must confine our discussion to mental health issues he eventually became hostile saying "you are a damn fool, doctor." The session was then Terminated. His appearance was good - clean shaven, haircut, etc. Speech was clear and spontaneous. Mood was predominantly euthymic with no signs of dysphoria. No thought or perceptual abnormalities were observed although he may have adopted some religious preoccupations (e.g. his "spiritual" treatment regimen that is self-imposed and adverse to Jesus and Bible verses). His self-diagnosis of schizo affective disorder appears to be an arrogant and narcissistic ("in special") gesture if not another game (like his previous diagnosis of Schizophrenia + multiple personality). (A) NO Axis I, Axis II traits predominate. No acute psychiatric distress, in fact, no distress at all. (P) 2 RV. yrs Michael R. Gillaspie, M.D.
9/9/97 1345	Report to team of above visit and chart review by team. Decision made to bring him down next week for visit with psychiatrist. (P) RV x 1 wk for clinic. Michael R. Gillaspie, M.D.

MHLTH - 032

Please sign each entry with status.

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Ronnie Scott
TDCJ No.: 999164
Unit: Terrell (01)

Date & Time	Notes
Filed Date: 8-21-97 Time: 1435 Initials: LR	I-60 "I need medicine for original Schizoaffective disorder and to be assigned for work (my jaw Rad is my Treatment now). I sent an request to you (that Ms. Gilliland answered) "we" only get 2 hour recreations 5 days for work. This month it 0800-1000 hours so please don't call me during recreation. Thank You! Response: The psychiatrists have determined that you are not suffering from a psychiatric illness requiring the medication you have demanded. Regarding your recreation period, we have no call out (escorts) list for day and see inmates as they are brought to our attention. If you elect to stay in recreation rather than come for a requested session that is your choice. DR Cobler DO 08/20/97 1530
8-28-97 0700	SCR Dowd to speak with you concerning your Schizo affective disorder (Mrs. Gilliland has answered your I-60's x3). Plan: Appt. Scheduled for 8-29-97. CA Cooling RN

MHLTH - 033

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Parotti, Scott
TDCJ No.:
Unit: Ellis I

Date & Time	Notes
3/3/97 1000	Pt. Refused Scheduled appt this date. Rv PRN. Lisa Heaton, M.A.
3/12/97 0800	SCR "MS. Heaton for treatment of Schizophrenia". Plan: Appt. 3-13-97. Brenda Gancher/Cmsr
3/12/97 0900	(3) Pt. Seen this date per SCR above. He discussed his frustration over "perceived injustices" within the TDCJ System. (especially his "perceived lack of Medical and Psychiatric treatment) He states that he wants to be treated for Schizophrenia and is upset that the Psychiatrist does not agree with his diagnosis. MS. appears to be within the normal limits & functioning adequately, no acute distress. Rv PRN. Lisa Heaton, M.A.
JW 3/12/97 0800	~~SCR "~~ ERROR Pt
6-9-97 0730	SCR - "I need to speak with you ASAP" PLAN: Appt 6-10-97. Brenda Gancher/Cmsr
6/10/97 0900	(3) Pt. Seen this date per SCR above. He discussed his history and the events which led to his incarceration. He talked about his feelings that he is Schizophrenic and the possible

Please sign each entry with status.

MHLTH - 036

ISM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Powell, Scott
TDCJ No.: 999164
Unit: Ellis (ELS)

Date & Time	Notes
2/10/97 1530	The individual was scheduled for this morning on SCR after Friday 2/7/97. He was offered opportunity to come to office by CO III Wilkerson. When asked he denied "I will go to see Ms Heaton, but will not see any of the rest." The writer was asked if he was refusing to which he responded in the affirmative. PLN
2/12/97 0800	SCR Requesting to see MS. Heaton to discuss Dr. Arambula's visit. Plan: Appt. 2-13-97 w/Ms. Heaton Brenda Sanchez/Caseworker
2/13/97 0900	① Pt. keep this date per SCR. He discussed his perceived lack of medical treatment including psych services. He also discussed lack of staff interaction with specific complaints of officers who he feels are mistreating him. ② Mood was appropriate affect broad. Pt. is oriented to person, place, time. Pt. is Alert & Cooperative. Thinking is adequate. No Acute distress. Pt. is oriented to "west of Texas" RN - PSN. Lisa Heaton M.A.
2/21/97 0800	SCR "For treatment therapy to discuss my mental health". Plan: ~~2-24-97~~ 2-24-97 Tuesday. Brenda Sanchez/Caseworker
2/24/97 3:00	③ Pt. keep this date per SCR above. He discussed his hepatitis vow and his continued Refusal to cut his hair and beard. ④ Mental Status is Somber

Please sign each entry with status. ( ) MHLTH - 038

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Panetti, Scott Louis
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
11-27-96 0715	Sick: Madam, I was at UTMB Galveston for an appointment on Scheduled date last Tuesday. I need to see you ASAP" Plan: Appt. 12-2-96. Brenda Panetti/Cayenne.
12/2/96 2:00	Pt. seen briefly bedside per Sick Call Request. Pt. is in no Acute distress and functioning adequately, MS-WNL. He will be rescheduled for tomorrow AM. Lisa Hasbun, M.A.
12/3/96 0900	S) Pt. seen this date per Sick Call Request. Pt.'s chief complaint today centers around medical concerns, (perceived lack of medical attention), and his self described schizophrenia and refusal to obtain specific Psychotropic medication. Mood euthymic, thought logical but loosely associated. Pt. allowed to "vent" schizophrenia, functioning adequately, no Acute distress. Rx PRN. Lisa Hasbun, M.A.

MHLTH - 040

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CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Parrish, Scott
TDCJ No. 999164
Unit: Ellis I

Date & Time	Notes (Chart 284) Dr. DeHuneja's
11/5/96 3:30	Pt. seen this date per sick call request. Pt. discussed "perceived injustices" within the TDCJ system especially with regard to medical and psychiatric care. Pt mood even with broad affect. Loose associations of thought/ ideas as pt. would go from one topic to another rather abruptly. Pt. advised to "vent" frustrations (A) functioning adequately, no acute distress. (D) RN Dallas Lisa Watts, R.N.
11/8/96 1020	I-60 - "I wish to speak with you A.S.A.P @ your convenience." (Dated "NOV 5 1996"). Reply - You were seen on the date you wrote this request, and no need for treatment was discussed. (P) TRN Michael R. Gilmore, Ph.D
11/12/96 1330	Chart review indicates error in entry of 10/1/96 by the undersigned. Note on that date indicates he was not seen as per schedule of 9/24/96 because of "lack of escort". Actually the inmate was off the unit on that date as he was transferred to UTMB Galveston for medical treatment. Michael R. Gilmore, Ph.D
11/13/96 0930	I-60 + Letter Registry Service RESPONSE: "We have received your request asking reference to [illegible] the patient referenced have already attended sick call-out at your unit. This request asks for a review, but no specific

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MHLTH - 042

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: RANSTI, SCOTT
TDCJ No.: 799164
Unit: TULIA OR

Date & Time	Notes
FILED DATE: 10-23-96 TIME: 1405 INITIAL: PC	SICA: "I'm requesting weekly or at least bimonthly psychotherapy with a female therapist as it is more comfortable for me. Do my records I have show a Mrs Pam Bibby (V.A. Hospital) that has worked best for me. To discuss my mental illness." 10/21/96 1045 hrs REC Signature MD
	REPLY: "10/21/96 - Your request has been referred to my office for response. Staff you have been seen & overall numerous times that we have NOT found any psychiatric disorder or thing that you would need weekly sessions for. The efforts we have offered in the past to you - you have rejected. Dr. Gibson saw your again recently & found nothing to indicate anything to treat. WHAT SPECIFIC PROBLEMS DO YOU NOW REMAINING TO? Signature MD PSYCH
11/1/96 1505 hrs	I-60 - "Madam, I hope this few records (referring to accompanying paperwork) show my need for treatment and at this point "I" trust only yourself. I'll beg not for humanitarian treatment. Please review these A.S.A.P. if the powers that be are of Negative thoughts, interviews, maybe there help somewhere. Reply - The psychiatric services personnel work on a treatment team under my direction along with Mr. G. Mc Gee. We typically do not grant requests to be seen by specific staff members when treatment needs & plans have already been established, which

Please sign each entry with status. ____ ____ MHLTH - 044

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI, SCOTT
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
9/12/96 1220	Inmate seen as per SCR above. When asked about his reports of auditory hallucinations he says they may quite possibly be the "best therapy I've had." He says this is true because the voices are "divine." When asked to elaborate he does not answer questions directly and engages in logical but tangential, overly philosophic discourse that evades the original question. He gets moved to talking about medication which he seems to be requesting but won't say so directly. He says he wants to prove his sobriety but offers no meaningful explorations. He says he wants someone to talk to. (D) Individual thoughts are logical, but loosely associated. Answers to questions are vague, approximate, and/or evasive (A) R/O malingering Vs Factitious Disorder. The former appears to be most likely given his history of substance abuse providing motivation for malingering to get psychotropic medication. (P) RV x 1 wk.
PV	Michael R. Allen, M.D.
9-17-96 0830	[illegible]

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MHLTH - 048

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Forest, Scott A.
TDCJ No.: 555164
Unit: Ellis (D/R)

Date & Time	Notes
Page 1 (cont'd) Init: DV	presents to assistant with MD. It is equally interchangeable with each other, primarily one of which is required daily. There is also a figure 8 which should be applied long over the gastric. He appears to be smoking and regimen for "schizophrenia" due to his ability to function. Dr. Yip has constantly tried to help to get identified as to the interim to the appropriate [illegible] and required. The family denied to be diagnosed from consult if he was not going to go seen by MD and during the natural. The psychiatrist and team agreed.
(2)	DISCHARGE DIAGNOSIS:
	AXIS I: No Major Mental Illness Bowel Syndrome / Eating Disorder NOS likely
	AXIS II: Obsessive Personality Disorder Mixed
	AXIS III: None known
	SIGNATURES: Brenda Dancher (CA-DSR); [signature] MD A Cooling RN
	PSYCHIATRIST'S SIGNATURE: [signature]

Please sign each entry with status.

MHLTH - 051

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANATH, SCOTT ALAN
TDCJ No.: 895164
Unit: ELLIS (10/K)

Date & Time	Notes
FILED	DISCHARGE STAFFING (16 JUL 96 / 1330 HRS)
DATE: 7-23-96	Pt was seen by the treatment team for a return
TIME 1315	staffing session. He had continued to be an oppositional
INITIALS: ac	& demanding inmate, who had maintained a manic presentation,
	fabrication symptomatology & episodic confusion since his
	arrival to the unit. He has been supportively addressed
	& been attempted to utilize objective criteria in an
	effort to help r/o dispositional issues/conditions &
	clarify goals. He refuses to cooperate with his
(1)	original plan for work-up & reliability/objectivity
	of the instruments. He returned the same type of behavior
	at J-II when we sent the unit for a second opinion
	at a psychiatric inpatient hospital setting. He has returned
	to be seen as a non-psychotic, chronic personality disorder
	who at most is a GANSER SYNDROME & FEIGNING BRAIN
	DAMAGE SYMPTOMATOLOGY. He has been observed
	struggling against efforts for aggressive pursuits & past
	when approached by tech staff for chronic physical
	issues. There was a lot of emphasis on his past & present
	as a documentation of MPD symptomatology. His family
	was on at length also about the manner in which his reported
	different personalities will shift moments to minutes &
	at least in the way I could testify to sessions.
	He had several times attempted such shifts here with

with status.

MHLTH - 052

CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Parretti, Scott
TDCJ No.: 999164
Unit: Ellis I

Date & Time	Notes
7/16/12 (wed)	and he walk the he would might to be the of the caseload ; I book himself spitally. . O: Alert oriented, woman, uncooperative, organized in way we dot psych wtl. may to the mood = un E agg aff -- + I Wan ⊖ wt RTC pw

ROMEO S. YAP M.D

MHLTH - 053

Please sign each entry with status.

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PATETTI, SCOTT
TDCJ No.: 199164
Unit: ELLIS (D/R)

Date & Time	Notes
7/9/96 (cont) (2) PC	Pt states that the "changes in my brain" will be checked if I am to be tested for my mental illness. Pt still does not appear to be in any acute distress and the degree of what we see as actual AND IS pathology is debatable at best. RV: 4 wks Skye Kellett PA
7/9/96	1330 error B Birdwell hsm. H5A-9 (S) need medicine as infection is getting bad again. (P) error B Birdwell hsm Clinic appt. scheduled. B Birdwell hsm
7/16/96 0950	S: Pt seen & evaluated. He stated that he is trying himself & spiritually. Went back to his record in statistic clerk that he was Dx as a schizophrenic, contrary to record stating that he was Dx for alcohol abuse, cannabis, polysubstance abuse, & is currently D/C. Explained to him that these are all the Dx he had of in statistic stating that the records are all messed up. He had not been truly honest. Since he got back from SHU Cell, clearly that the meds don't agree with him. He had been observed & monitored on a very regular basis. No overt psychosis / psychotic phenomena was noted. During the interview period, till his eyes started to water with that because he was not honest truly with his meds, he must be observed by the team & the med. He then stated that if he can't get off

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MHLTH - 054

ISM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Pannell, Scott A
TDCJ No.: 599164
Unit: Bells (D/K)

Date & Time	Notes
FILED	Disciplinary Case Review # 14719 + 31692: (11 Jun 96/1500)
DATE: 6/18/96	She does need more removed written to the
TIME: 1830	initial m/s writing for p/s 2.02. Both
INT: BR	cases were cleared for administrative
	disposition
	[signature] MD
6/26/96	Disciplinary Review # 31366:
1530	No reason to preclude for p/s 2.02. [signature]
	[signature] MD
6/31/96	Disciplinary Review # 36199
1500	No reason to preclude for p/s 2.02 [signature]
	[signature] MD
7/8/96	Disciplinary Review # 45547:
1230	No reason to preclude for p/s 2.02. [signature]
	[signature] MD
7/9/96	The inmate was brought to the Office for regular review. He
0945	has a full beard and is clean, cooperative and goal-directed. He
	is now requesting to be put back on the "medication VA Rel
	me on". He is reporting the symptoms of "illusions,
(1)	delusions and disjointed as before. He is well
	oriented to person, time and place and is generally coming
	to clinic for visitation with the psychiatrist. Denies any
	homicidal ideations. He is making efforts to possibly "stay off by the wall
	and stand up with the other people". (CONT)

Please sign each entry with status.

MHLTH - 055

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI, Scott
TDCJ No.: 999164
Unit: Ellis (I/R)

Date & Time	Notes
6/18/96 1000	The inmate was in office complaining that the med Judicial on the unit is upset by not giving to B Lic. He is still angry at not getting Depakote for his "Schizophrenia". The writer is discussing appointment of not getting off it's the fact his "religious freedom is upset". I explained to writer Depakote is not psychotropic. He is upset that he was not to receive Depakote and that 1992 book is a dispute. Still the writer states that Depakote which upset him is his safety + post druggs. AV JWKO

MHLTH - 056

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Panetti, Scott
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
6/5/96 1305	Inmate seen as per disciplinary cases # 960306078 and # 960303194 for refusing to groom. He says he has taken a "Nazarat vow" and has "re consecrated his hair." He further states that his "religious vows" of late are an alternative to him not getting the medical and psychiatric treatment he thinks he needs. He complains about his treatment by medical and psychiatrics and wants his previous treatment. His mental status is WNL, but he is tangential in his speech and conversation. He is cleared to participate in disciplinary without restrictions. MP Michael L. Gillenwater, M.D.
6/10/96 1345	Inmate requested presence of psychiatric service at his disciplinary for absent infractions. He attempted to use the disciplinary hearing as a platform to criticise his medical + psychiatric treatment. Once the disciplinary conditions which did not include the offense was explained, he was dismissed. (C) He was clear + logical in the hearing and displayed no symptoms of mental illness other than Axis II behaviors. (A) Doubt Axis I diagnosis as he is clear cognitively and manipulative. (F) as previously scheduled. Counselor discharge from counselors MP Michael L. Gillenwater, Ph.D.

MHLTH - 057

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HSM - 1 (Rev. 5/92)

CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Pruitt, Scott
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
5/16/96 1400	Pt was scheduled to report of Ms Brown because he had acts I-60 explaining that he is not getting specific types of treatment to be started he needed. He is depressed as they will be. I explained to him that he would see a doctor. Pt is not showing signs of being an appointment penalty duties including the possibility of psychosis, refuses at this a medication. KV: to schedule
5/21/96 1020	DISCIPLINARY GRASS # 19378: There is no reason to preclude pts P/S 2.02. Cleared for hearing.
28 MAY 96 0930	Pt was scheduled for routine office visit. When brought down to office he refused to go in with the other T/T. It was explained that he was to be seen today. He went on + on "about with 7 times," "Ms Hutton removing him I bring a religion / afg mistakes" and exceptions. [O] the MD is good with all issues that he was thinking of he was dumb. He is being appointed and apparently just playing games [A] Pt's [P] DC should be we would see him next Tuesday available as a [T] ② will also separate ending ③ NAP 6/11/96 RV: 3 mos

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MHLTH - 058

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CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: [illegible], Scott
TDCJ No.: 559164
Unit: Ellis (D/R)

Date & Time	Notes
4-25-96	Compliance check. Error
0730	error
5/7/96	Pt was scheduled for routine office follow-up. This
1500	nursing hx should the exact appointment did not read
	if he was going to want to see for appointments after
	vacation period. After lunch they went back and
	he should see [illegible] Bedford," told MA called to
	pt's that he need any f/u to vacation therapy today."
	He returns to room & will called out fully
	appointment letter I regarding. No acute
	distress.
	RN: 3 WICS

MHLTH - 059

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HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Randall Scott
TDCJ No.: 599164
Unit: Allred (WF)

Date & Time	Notes
4/16/96 (cont)	Inhibited affect in ROM when he "attributes full responsibility with illness to the 'illness making boys'" he is wrong and has rech. He will have a disjointed, tangential relation & how Thorazine and the prohibited substance could have "cause some more effects". This appeared to be strictly conjecture & theorizing. Made MHMR appointment & WNL. Topics we discussed & bringing a record reports. Pt could recite a brief abstract rule "some, wanted - she but" etc WNL content.
(2)	III. DIAGNOSTIC IMPRESSION: AXIS I: Deferral (799.9) AXIS II: Antisocial Personality Disorder (301.7) AXIS III: None Known IV. RECOMMENDATIONS: We will continue to follow pt for safety. We are still attempting to get Offender F/U Forensics, which is pt small concern. Pt is NOT on meds and is doing quite well. Symptoms described with one in Tx.

MHLTH - 060

Please sign each entry with status.

CSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Rowton, Scott
TDCJ No.: [illegible]
Unit: [illegible] (D/R)

Date & Time	Notes
FILED	Disciplinary Case #224828: (26 MAR / 1030)
DATE: 3/27/96	Subsequent to O/P staff's removal of gym work
TIME: 1600	assignment for D/V report we discussed how. No
INITIAL: [illegible]	Y room to preclude for P/S 2.02.
4/8/96	We received a response to VA request at Tomah,
1430	Wisconsin. They stated they had no records
	at had forwarded them to VA Kerrville.
4/8/96	She inmate was scheduled for contact to Chaplain's
1600	office and the school due to shortage of
	escort officers is unavailable. Rescheduled
	for contact for next week.
4/16/96	She S contacted Officer and interested in an appropriate
0830	Religion. He was well attired and in fairly good spirits.
	He is NOT taking any medication and believes his
	request is due to "medium hype / white spirit" he was
	around his neck. He signed the release for
	"Mental Health". He is in no acute distress.
	RN: 3 wks

MHLTH - 062

Please sign each entry with status.

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CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PONETTI, Scott
TDCJ No.: 599164
Unit: Ellis (10/R)

Date & Time	Notes
3/25/96 1130	Pt is scheduled for appt. He states he has appt for 2 weeks to be brought to office. Has appts [illegible] to go to [illegible]. Will attempt to get him on a MC Clinic tomorrow, pt was informed. If he is upset over not getting appt, [illegible] will make possible. Explained with appt to remind patient. [illegible] RN: 2 wks
3/26/96 0950	S: Pt is waiting to see [illegible] appt with [illegible] Psych. Pt states he has not been fully honest with [illegible] & does not want to continue talking with [illegible]. Pt wants to have psychotherapy only on his request. Pt states he does not need [illegible] O: WD/WN [illegible] Lungs: CTA's no [illegible] noted. [illegible] A: [illegible] P: [illegible] psychotherapy

ROMEO S. YAP M.D

MHLTH - 063

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI, JOHN
TDCJ No.: 999164
Unit:

Date & Time	Notes
3/7/96 cont'd	- claimant he has not been taking Depakote - "it doesn't help" him + doesn't want to take it. He takes Prolixin + tolerates it. Pt mentation normal, ~~oriented~~ aware of circumstantial, grandiose ?? ideas, interacts well, talkative, ~~[illegible]~~ suicidal, fair insight + judgement. Discussed with him obligation to unit give benefit of doubt + cont. him on Prolixin. Pt will receive CPAP shortly so DC for leave + I will prepare Interdisciplinary team to determine further diagnosis + treatment.
3-19-96 1445	I/M returned to Ellis from CMC on 3-18-96. He has an appt. w/ Dr. Dillingham on 3-21-96. Psych med current. — Mooring PA
3/21/96 1548	INMATE SCHEDULED FOR RETURN TO UNIT, BUT NOT SEEN DUE TO NO ESCORTS AVAILABLE.

MHLTH - 064

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: RANETTI, S.L.
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
2/22/96 1230	(S) Inmate seen as per SCI referral on Sibutad was sent this date. His nose is swollen and red. He says he is not taking his medicine (Depakote) or Trilafon. He says the medicine he was taking with the VA + the dosage levels gave him "tremendous relief." He also says he wants to be put back on. (O) Mood normal is usual. No signs or symptoms of mental illness. His thoughts are clear, verbalizations are coherent. He presents his arguments well. (A) Looks like malingering. No Axis I present. (P) Inmate became upset that his request for immediate "treatment" was not met and became verbally abusive. Sent to chart to psychiatrist to review inmate request for medication change. Richard T. Gilbreath, Ph.D.
3-5-96 1330	Estelle RMF Clinic Screen. SIAH. Hx of psych tx. Recently (2/27/96) given a "no axis I diagnosis" See PRN. R Colyer, CSW III
3/7/96 1130	37 y/o WM referred by medical. - personnel records from Jester & outpatient progress records. Shared list of questions about his diagnosis. - during interview claims to receive injections from VA + Kerrville State Hospital

MHLTH - 065

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI
TDCJ No.: 999164
Unit: ELLIS (D/R)

Date & Time	Notes
2/12/96 1245	Pt was seen on routine follow-up. He is requesting to have his records sent to MHMR. He was advised that he needs to sign a MR release form for this and to get signed release. He also states that he is NOT taking the Depakote prescribed 3 weeks. He is refusing MH meds to get his mental/psych meds switched to the psychiatrist (Dr. Yap) on the unit "Crowell". He promptly refused again to sign his consent form after he verbally consented to open to the meds. He is stating that he will sign after he gets his meds at "the right moment". His speech is mostly good, he is cooperative, mood is mostly effectively. He seems to be intoxicated today. He is still upset with Lieutenant [illegible] who was a witness of a disciplinary "does you & her you". He still appears down, frustrated, but is quickly brought back with direction to regard to positive issues.
	avs 2 mo RV [illegible] MD
2/27/96 1700	SCR(2) "See Dr. Yap for treatment." and "Mr Hester, I respectfully request an interview to discuss treatment for my mental illness." Pt'd + scheduled w/ Gallegos for 2/27/96. [illegible] Gallegos, M.D.

Please sign each entry with status.

MHLTH - 066

HSM - 1 (Rev. 5/92)

J0174

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Panetti, Scott
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
1/23/96 (cont)	[illegible]
	[illegible]
	[illegible]
	[illegible]
	[illegible]
	O: [illegible]
	[illegible]
	[illegible]
	A [illegible]
	P: [illegible]
	[signature]
	ROMEO S. YAP M.D
1-29-96	Compliance check: 1-24 to 2-22 ~~1-24 to 2-23~~
0845	Divalproex Na 250mg ÷ po qam 2/6
	Divalproex Na 250mg ÷÷ po qpm 3/7 ~~250ma~~
	Trilafon 4mg po qam ÷ pm 5/10
	Plan: Comp check in 4 wks. A Cooling RN
2/9/96	SCR: "need new meds and I'd like to read my
0930	files and ok mom to speak with Dr. S. about
	obtaining records of past treatment of disability -
	schizophrenia".
	Plan: appt 2/12/96. Brenda Sanchez/Casemgr

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

MHLTH - 067

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PAVETTI, SCOTT
TDCJ No.: 999164
Unit: LEWIS (D/A)

Date & Time	Notes
4 JAN 16 0845	Pt seen in office with escort visit. We discussed his care lengths he desires to be treated for his "Schizophrenia", "depressive disorder" & "mental illness". He stated he has taken from 5-10 yrs. that he needed Clozaril but that it "could only be given at Skyview". He said he is good natured when he wants to get his way & that he is mostly ill and needs medication. Pt seemed lost at times between both parts & Having to deny psychosis to Cogntl. and then immediately look to him & stated auditory. Pt is NOT as expected as we originally thought might be the case. There is a distinct possibility that we need to further deny Axis I thinking there are delusional/psychotic processes & delusional thinking. The "auditory" that he is so adamantly insists "is" are 5 girls Hebrew & country girls". "They sing in Hebrew dreams from (Hebrew)". When the pt is engaged in simple conversation & his voices seem to begin to diminish but pt. seems to spend a lot of energy & "mental illness" that what is "the battle I am in-here". I am also very suspicious that he could be distilled out from remedy & interpret facts. Will continue pt. in WNL Psychosocial

Please sign each entry with status.

MHLTH - 072

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PAUL III, S
TDCJ No.: 539164
Unit: Ellis (OR)

Date & Time	Notes
27 Dec 95 1000	Received the charted transition from results at J-IV (c/m + a/c). It is very interesting to note that the team in both places had the same dilemma in how aggressive is making down a dual diagnosis. It is sad they have tried Rx on the regimen he is so existedly upset (urged a "cocktail". This reminds me of a differential diagnostic test is checking for results. There is no "I" written transition but the feeling is the diagnosis is c/o ad (Provisional) addict that is on after depot. He was not upset by perfusion of more than is often as is rare — I would remind that the yellow slip we all use to type) orders. Will not check. RV: O WP, JP ON IVR (if we are to get done today) — ORG
1/2/96 0955	S: Pt seen & re-evaluated after dialysis from JIV. He was seen by Tx team who seem to think that he could also be malingering & could be some significant down today. He did not complete the tasks as he told them eg, I would not recognize a today. When seen today, he tries to act confused. When told that a "Dr. Yag" got him in and why he was in JIV

Please sign each entry with status.

MHLTH - 074

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PAGOTTI, S.
TDCJ No.: 999164
Unit: DALLAS (OK)

Date & Time	Notes
7 Dec 95 (Sun) (2)	Inmate was entering writing a letter. He is also showing evidence of thought intimidation. He is not posing any suicide gesture, but is making comments on how difficult it was to write. Will continue ongoing assessment given for 8 Dec 95. Inmate was instructed for his own safety to cease writing letter - x/o MD & Sch. Transf J-IV 8 Dec 7th Squad Transf to Upp 4 Ors am.
12-22-95 1030	Rec'd from J4 E meds - orders cont. per T.O. of Dr. Yap. Scheduled for 12-27-95 E MD. Gilliland. — Cooling RN

MHLTH - 076

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: PANETTI, S.
TDCJ No.: 999164
Unit: Ellis

Date & Time	Notes
10/26/95 cont	response and a reflex response. This exhibits his thought + perceptual processes are intact and that he tends to be concrete. He may have some loosening of his thought processes, but this appeared to be exhibited as in part to evaluate the existence of mental illness. The protocol offers little support for an MR & I Diagnosis. Michael R. Schwartz, Psych
11/28/95 0945	S: Case discussed c Dr Tam., NO referral nor request for services was given to Dr Tam. Part mental retard. Hx is MHMR + provided tht was invalid ~~and~~ 2° to intentional effort to appear psychotic. No mention of psych was mtl. during the interim period O/E I None A: Flu prev (Over)
7 DEC 95 0830	She ~~and~~ S was seen again request a SCR regarding desired to meet Dr Mrs. He was into the room talking incoherently + responding. As I began to ask questions pertaining to how he was doing, he immediately began asking lucid questions but not to why he was not being treated. We discussed his Records and I showed him that none of the hospitals have yet sent anything I needed. He remained well controlled during the interview + kept on at one point that he is angry I retired + hates I "Schizophrenic" + "MHMR"

Please sign each entry with status.

MHLTH - 078

HSM - 1 (Rev. 5/92)

CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Pannell, Scott Allan
TDCJ No.: 599169
Unit: Hilltop (D/R)

Date & Time	FILE IN CHART WHEN LOCATED Notes
FILED DATE: 10-26-95 TIME: 0945 INITIAL: AC	This D/R inmate was seen in office by both Dr. Gilbreath and this writer on 25 OCT at 0800. He was brought to office by escort at request of SGT Patterson. The inmate was reportedly complaining bodily about some pain & "crushed glass" at his lack of psychotreatment. We listened to his complaints of his continuing nightmares but having been medicated, denied desire to volunteer at numerous & ongoing psychiatric visits. He claimed to hear on his having been a Schizophrenic by a "less competent doctor". He said remained convinced he was victim discriminated against & disenfranchised as a Schizophrenic. He was explained Dr Gilbreath's intent to protect his civil rights. He requested to secure for a legal visit with attorney. He is in acute distress & does ability to control agents & actions however quite stabilized. Richard R. Gilbreath, DMD Michael R. Gilbreath, DMD
10/26/95 1130	Inmate Escorted to office to give Psychiatric INKBLOT TEST with inmates consent. The inmate produced an unworkable protocol as he was evasive on the isolated portions of the test. I believe this evasiveness was intentional and not due to florid psychosis. The responses he did give were two popular, numerous personal

Please sign each entry with status.

MHLTH - 079

HSM - 1 (Rev. 5/92)

TEXAS DEPARTMENT OF CORRECTIONS

SHORT STAY PSYCHIATRIC ADMISSION RECORD

(72 HOUR OR LESS)

PANETTI, SCOTT 999164

PATIENT ID

PSYCHIATRIC HOSPITALIZATION OF MORE THAN 72 HOURS MUST BE CONVERTED TO LONG FORMS

PSYCHIATRIC HISTORY (TO INCLUDE REASON FOR REFERRAL) / PRIMARY THERAPIST This 37 year old Caucasian male was received on Jester IV Crisis Management on 12/12/95. He was referred from Ellis I Unit by Dr. Yap. Reason for referral were presented by Steve Gilliland the unit psychologist as possible psychotic disorder and the need for second opinion. Nursing admission note reflected this patient was oriented X's 1, denied any suicidal ideation, appears to be delusional and verbalized auditory and visual hallucination. Freeworld psychiatric history reveals a previous treatment at the Starlight in Kerrville State Hospital for psychiatric substance abuse. This patient was also treated at Kerrville Va Hospital in 1986. Evaluation in his brown chart reflected symptom of schizoaffective disorder and treatment previously at the Waco VA with medication of Trilafon, Elavil, and Cogentin. Follow up phone call to the family Mr. Ozumba was able to confirm wit the patient's father a previous history of psychiatric treatment. The patient's father also shared with our social worker that the parent's had difficulty communicating with their son as times he utilized different names and identities.

MENTAL STATUS EXAMINATION (PRIMARY THERAPIST) This 37 year old Caucasian male appears to his stated age. He stands about 5'11" and weighs approximately 200 lbs. His general attitude was cooperative and he maintained appropriate eye contact. His speech varied in terms of volume and speed, His affect was mostly flat and his mood was unhedonic. His thoughts were loose and disorganized. His thought content reflected disorganized thinking, bizarre ideation, visual and auditory hallucinations, reference to different names and identities but no active homicidal or suicidal ideation or plans. His insight into his symptoms were poor, judgement appears to be good. This patient was a challenge by the treatment team regarding the authenticity of his symptoms he did not become angry nor did he react and he maintained his own preoccupation with his psychotic symptoms. ASSESSMENT mental status this patient was seen and assessed daily by the Crisis Management treatment team. This patient presented loose and disorganized who at times referred to different →

ASSESSMENT (D & E TEAM) ↑

DISCHARGE DIAGNOSIS (D & E TEAM) Axis I R/O 295.70 Schizoaffective Disorder; R/O 295.90 Schizophrenia undedifferentiated type, R/O V65.20 Malingering (Provisional)

PLAN (PRIMARY THERAPIST) Discharge this patient to his unit of assignment on his current prescribed medication of Trilafon and Depakote with recommendation for the receiving unit unit evalute on 30 days or that these medication had any effect in ameliorating his curren symptoms.

MHLTH - 088

MA ACP IV

SIGNATURE OF PRIMARY THERAPIST (PSYCHOLOGIST) — DATE — SIGNATURE OF D & E PSYCHIATRIST — DATE

HS-67 H. Gadban, MA, PA ACPIV 12/19/95 H. Patel, MD 12/19/95

PANETTI, SCOTT #999164

Continuation of Mental Status Examination:

...d he prescribed Trilafon, as well as Depakote for medication. This patient willingly cooperated and took the medication as prescribed. Also while in Crisis Management this patient did not behave in any aggressive manner and his bizarre disorganized thinking was consistent throughout our daily interviews and psych aide observation and communication with the patient. With the absence of imminent danger to self and others and the patient uncooperation the testing process was decided to discharge this patient back to his unit of assignment on his currently prescribed medication.

MA ACP IV

MHLTH - 089

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: PANETTI, SCOTT TDCJ#: 999164
12/14/95 BI-24	Patient reported that he did complete his MMPI and then he tore it up and flushed it down the commode. His reason was that he couldn't answer some of the questions honestly because he had ambivalence about the answers. Patient also reported he was physically and sexually abuse as a child. Acknowledge to the staff that the questions were posed recent phone call to his father revealed an acknowledgement of multiple hospitalizations, strongly suggesting that they were psychiatric admissions rather than substance abuse or chemical dependency treatments. However the pt. himself said he had a 6 CD admissions, approximately 5 neuropsychiatric admissions.
	DSM-IV DIAGNOSTIC IMPRESSION: In the past the patient has been plagued with multiple different diagnoses. He said the DX of 300.14 Mood Disorder, he has been diagnosed with a schizophrenic disorder and I am leaning towards malingering. However we don't have that much information which is all the interviews are inadequate. He is very circumstantial and tangential and part of the treatment team believes that he is telling the truth and part of it doesn't. We are going to ask for a second opinion from A/C team for diagnoses, treatment and disposition.
	R. Orr, MD/rbarrientos 12/14/95

MHLTH - 095

SM-75 (Rev. 2/92)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: Parelli, Scott TDCJ#: 999164
12-14-95 (cont)	and occasionally irrelevant answers were due to intentional evasiveness or actual thought d.o. is not entirely clear: but as "pressure" interview continued, he began to exhibit fatigue (and became more abstract and loose(?) Mood self-described as "frustrated". affect blunted. Denies SI/HI or intent. "I do want to die -- but not even the most remote parts of me have ever or will ever hurt myself intentionally." Yet he added "Scott resents the suicide watches -- I've been dead 2x before -- do not fear it." Attention, concentration fairly adequate, but he exhibits exquisitely autistic preoccupation of even thought processes/content. (General intellectual functioning appears at least average, & apparent capacity (and fondness for!) abstraction & metaphor use of language is decidedly odd. Appetite okay. "I don't sleep

MHLTH - 099

HSM-75 (Rev. 2/92)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: Panetti, Scott TDCJ#: 999164
12-14-95 (cont.)	who presented as courteous and displayed monotonic, stylized speech. He assertively opened the interview c a rambling, tangential, circumstantial diatribe. (eg.- "I read Dr. Orr's belt buckle -- hard to see at a distance -- thought it said 'Stand Tall. Walk in Peace' - like a code I saw on my pick. carton - I saw 3 ravens -- and a very contented bunny rabbit" -- have a Warrior Woman in Washington etc. etc.) Re-directed to focused chronology of tx; he provided more relevant organized (accurate) responses but still tended toward tangentiality, circumstantiality. Interspersed into c multiple refers to "Search" "Wounded Sunbird" "St James" "Rapture" "Scott". Also made multiple references to religiosity ("only want to go where God directs me" -- "I have a Native American ministry" --

MHLTH - 100

HSM-75 (Rev. 2/92)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: Panetti, Scott TDCJ#: 999168
12-14-95 16:30	Code B - Consultation Note: 37 y.o. W/M referred to Crisis from E-1 Death Row. He arrived on DR 10-3-95 after incarceration since 1992 at county jail. Convicted of 2x capitol murders (of his parents, per DR intake data). The chief complaint from referral source was "R/O MPD. R/O Schizophrenia". Assessment at E-1 since arrival included Rorschach and MMPI-2. Rorschach unscorable due to masked evasiveness on inquiry phase. (Examiner suspected it was intentional). MMPI-2 deemed invalid 2° to apparent over-reporting response set (no scores specified in record.) Nonetheless, subject reported extensive Psych hx c multiple hospitalizations, 1980-89 at Starlight Village (4x), Kerrville S.H. (x2?) Waco VA, and outpatient VA care) c other CD admits.
12-21	Have chart includes documented support for the hx c variable dx: Chronic Undifferentiated Schizophrenia versus Schizoaffective D.O. (c polysubstance dependence).

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HSM-75 (Rev. 2/92)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: PANETTI, SCOTT TDCJ#: 999164
12/13/95 B1-24 0808	Patient is still very circumstantial and evasive, he refuses to stay on the study or the treatment team thinks this is looseness of thought association and part of it thinks that this is contrived evasiveness. The patient keeps talking about various alters, he is unable to be consistent about when the alters showed up and who they were. Mostly what I could get Scott from birth and then at age 16 or 17 Ranahan, Montana cowboy, age 17 Sarge appeared in the Navy and then at age 28 the James brothers James 1 and James 2 and then he went back to something about wounded sunburn has been with him since he was an infant. We will come back later and try to get a more consistent history. Patient did not finish the MMPI yesterday but he will complete it today. As far as amenities all that he is going get from admissions amenities will be a mattress. R. Orr, MD/rbarrientos 12/13/95
12/14/95 0835	S: I did sit but I took it before and felt I was lying to myself. O: Sitting sunkside wrapped in seclusion blanket handcuffed to rear. A: Pt is labile this morning. At present on no psych drugs. Attitude belligerent. Says "One Creator Order God" but "problems self and etc help me." Pt noted delusional speech rambling. Typically @ age 6 drown and electrocuted school c 16. Pt reported abuse Pt at present does not appear a reliable interviewer. Confused basic [illegible]

Thomas Allen

MHLTH - 105

ISM-75 (Rev. 2/92)

7.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: PANATTI, SCOTT TDCJ#: 999164
12/12/95 @1-24 Page 3 of 3	Again my impression as that we are dealing with a Ganzer syndrome which is a combination of dissociative phenomenon and outright malingering. Kind of a 50/50 modality. PLAN: Do some psychometric testing, continue the interview tomorrow and probably we will have to get an A/C consultation cause we will need more time for monitoring and observation. If this is truly a Ganzer syndrome or he is truly malingering or he is truly a dissociative disorder we will need much more time to monitor and assess to make an accurate diagnoses and initiate an appropriate therapeutic intervention. R. Orr, MD/rbarrientos 12/12/95

MHLTH - 108

HSM-75 (Rev. 2/92)

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TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: PANATI, SCOTT TDCJ#: 999164
12/12/95 B1-24	and he started telling us about decoding. I believe he did in fact work as a decoder that
Page 2 of 3	part seems to be true.
	Mental status examination revealed a somber somewhat grandiose white male whose speech
	was spontaneous it was generally coherent and generally irrelevant and tangential to the
	subject. Patient was asked about time and he would give answers in terms of location. He
	was asked about public school and he talked about his enlistment into the Navy. He was
	brought back to the subject of public school and he started talking about work. He was
	very tangential, whether this was conscious evasiveness or looseness of thought
	associations the treatment team has mixed impressions about which was which. Calculations
	were extremely poor, they were more estimations or actually approximations. He could
	subtract 7 from 100 and get 93. When subtracting 7 from 93 he couldn't come up with an
	answer immediately but eventually came up with 94. With further prompting he again came
	up with 94 with some kind of convoluted number system in which 94 seemed almost
	reasonable. Again I felt this was a symptom of approximate answers actual cognitive
	disfunction or psychotic or loose thinking. Memory retention and recall, general fund of
	information were not tested. Judgement impaired, insight questionable. Again when asked
	questions about similarities or abstractions, when asked how is an apple like an orange,
	like a yubo boat is to a submarine.
	DSM-IV DIAGNOSTIC IMPRESSION: Axis I 799.90 Diagnosis Deferred, R/O Dissociative disorder,
	R/O Mood Disorder, R/O Schizophrenic, R/O Malingering, 303.90 and 304.80 Alcohol and
	Polysubstance dependence in remission without recovery; Axis II (Provisional) 301.70 ASPD;
	Axis III Old bullet wounds and some sort of a fungus infection and currently has
	complaints about a rash on the palm of his hand; Axis IV 4; Axis V 45 +/-5.

MHLTH - 109

HSM-75 (Rev 2/92)

7

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

INTEGRATED PROGRESS NOTES

DATE/TIME	NAME: PANATTI, SCOTT TDCJ#: 999164
12/12/94 BI-24	Chief complaint by the referral source psychiatric evaluation and a second opinion. Chief
0808 Page 1 of 3	complaint by the patient "They could not get my record". He indicated records from the VA
	and the freeworld. Patient was transferred without any psychotropic medications.
	PRESENT ILLNESS: Patient reported that he was or is disabled. Said he was declared for
	social security purposes in 1986. But actually he says he was unaware of any disabilities
	other than a mental/emotional disability but unable to describe what he could not do that
	any other man with his age and training and education could do. He was unable to answer
	that. He kept trying to steer the conversation to a disidentity disorder. He talked
	about a wounded sunburn, and talked about Branaham, and talked about Scott. He appeared
	to switch from one to the other during the course of the conversation. These switches
	were rather rapid, there was a slight change in his vocabulary and his tone of voice. How
	much of this was well rehearsed and how much of this was actual switching was not
	determined. However I had the distinct feeling that it was contrived. Patient had his
	own agenda, he kept turning the interview towards his alters. He seemed to want to
	impress us or lead us to believe that he did have alter personalities.
	CHEMICAL HISTORY: Patient states that he is a cured alcoholic and cured drug addict.
	Freeworld history: He estimates that he has had five neuropsychiatric hospital admissions
	and six chemical dependency admissions.
	FAMILY HISTORY: Patient denied any family medical history, psychiatric problems and
	perhaps only his father had a drinking problem. When asked about his educational
	background, his public school. The patient hedged and hedged, hedged and finally we got
	the point he is an 11th grade drop out, he got his GED and went into the Navy. He then
	started telling us about all of his espionage and counter espionage and work in the Navy

MHLTH - 110

HSM-75 (Rev. 2/92)

DOUG DRETKE, DIRECTOR – CORRECTIONAL INSTITUTIONS

OFFENDER NAME/NUMBER: **Panetti, Scott #999164**

EXECUTION DATE: **February 5, 2004**

OFFENDER SIGNATURE: Scott Panetti

A. I have been advised that pursuant to Article 43.20, relatives or friends requested by the condemned offender, who are eligible under the following criteria may be allowed to witness the execution of an offender sentenced to death. The relatives or friends may not exceed five (5) in number. However, a spiritual advisor to the condemned offender may be allowed to witness in addition to the five (5) offender witnesses. The spiritual advisor must be a bonafide pastor or comparable official of the church of the condemned offender's elected religion.

1. M.C. Gross – 106 S. St. Mary St. Suite 260, San Antonio, TX 78205
2. Yvonne Panetti – N. 1009 Marshall, Sheldon, WI
3. Louis Panetti – N. 1009 Marshall, Sheldon, WI
4. Karin Eberhart - Switzerland
5. Tom Panetti – W. 14536 CTH MM, Sheldon, WI
6. **(SPIRITUAL ADVISOR)**

B. I am further advised that the services of an attorney can be provided free of charge to prepare a simple will so I may dispose of my worldly possessions. I have indicated my desires by initialing one of the following:

1. The disposition of my estate is complex and could not be handled by a simple will; therefore, I have made my own arrangements. _____

2. Disposition of my worldly possessions is covered by an existing will. _____

3. Services of an attorney are required to assist me in preparation of a simple will. (Offenders who have $500.00 or more are not indigent and should arrange to hire an attorney to prepare a simple will if they do not want to use the packet or prepare a handwritten will.) _____

4. I do not desire a will. SP

[redacted]

DOUG DRETKE, DIRECTOR – CORRECTIONAL INSTITUTIONS

OFFENDER NAME/NUMBER: Panetti, Scott #999164

EXECUTION DATE: February 5, 2004

OFFENDER SIGNATURE: Scott Panetti

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Frnd 1. M.C. Gross – 106 S. St. Mary St. Suite 260, San Antonio, TX 78205

MO 2. Yvonne Panetti – N. 1009 Marshall, Sheldon, WI

Fa 3. Louis Panetti – N. 1009 Marshall, Sheldon, WI

Frnd 4. Karin Eberhart - Switzerland

Bro 5. Tom Panetti – W. 14536 CTH MM, Sheldon, WI

6. (SPIRITUAL ADVISOR) JESUS CHRIST HOLY SPIRIT GOD

B. I am further advised that the services of an attorney can be provided free of charge to prepare a simple will so I may dispose of my worldly possessions. I have indicated my desires by initialing one of the following:

1. The disposition of my estate is complex and could not be handled by a simple will; therefore, I have made my own arrangements. ____

2. Disposition of my worldly possessions is covered by an existing will. ____

3. Services of an attorney are required to assist me in preparation of a simple will. (Offenders who have $500.00 or more are not indigent and should arrange to hire an attorney to prepare a simple will if they do not want to use the packet or prepare a handwritten will.) ____

4. I do not desire a will. ____

I Desire A Will

DOUG DRETKE, DIRECTOR – CORRECTIONAL INSTITUTIONS

OFFENDER NAME/NUMBER: Panetti, Scott #999164

EXECUTION DATE: February 5, 2004

OFFENDER SIGNATURE: Scott Panetti

A. I have been advised that pursuant to Article 43.20, relatives or friends requested by the condemned offender, who are eligible under the following criteria may be allowed to witness the execution of an offender sentenced to death. The relatives or friends may not exceed five (5) in number. However, a spiritual advisor to the condemned offender may be allowed to witness in addition to the five (5) offender witnesses. The spiritual advisor must be a bonafide pastor or comparable official of the church of the condemned offender's elected religion.

1. M.C. Gross – 106 S. St. Mary St. Suite 260, San Antonio, TX 78205
2. Yvonne Panetti – N. 1009 Marshall, Sheldon, WI
3. Louis Panetti – N. 1009 Marshall, Sheldon, WI
4. Karin Eberhart - Switzerland
5. Tom Panetti – W. 14536 CTH MM, Sheldon, WI
6. (SPIRITUAL ADVISOR)

B. I am further advised that the services of an attorney can be provided free of charge to prepare a simple will so I may dispose of my worldly possessions. I have indicated my desires by initialing one of the following:

1. The disposition of my estate is complex and could not be handled by a simple will; therefore, I have made my own arrangements. _____
2. Disposition of my worldly possessions is covered by an existing will. _____
3. Services of an attorney are required to assist me in preparation of a simple will. (Offenders who have $500.00 or more are not indigent and should arrange to hire an attorney to prepare a simple will if they do not want to use the packet or prepare a handwritten will.) _____
4. I do not desire a will. SP

BEST AVAILABLE COPY

DOUG DRETKE, DIRECTOR – CORRECTIONAL INSTITUTIONS

OFFENDER NAME/NUMBER: **Panetti, Scott #99164**

EXECUTION DATE: **February 05, 2004**

OFFENDER SIGNATURE: _____

A. I have been advised that pursuant to Article 43.20, relatives or friends requested by the condemned offender, who are eligible under the following criteria may be allowed to witness the execution of an offender sentenced to death. The relatives or friends may not exceed five (5) in number. However, a spiritual advisor to the condemned offender may be allowed to witness in addition to the five (5) offender witnesses. The spiritual advisor must be a bonafide pastor or comparable official of the church of the condemned offender's elected religion.

1. M.C. GROSS Att of record,
2. Yvonne Pearl Panetti - MOM -
3. LOUIS J. PANETTI - JACK -
4. KARIN Eberhart (PANETTI soon ex-wife)
5. TOM PANETTI (Brother)
6. **(SPIRITUAL ADVISOR)** _____

B. I am further advised that the services of an attorney can be provided free of charge to prepare a simple will so I may dispose of my worldly possessions. I have indicated my desires by initialing one of the following:

1. The disposition of my estate is complex and could not be handled by a simple will; therefore, I have made my own arrangements. SLP

2. Disposition of my worldly possessions is covered by an existing will. SLP

3. Services of an attorney are required to assist me in preparation of a simple will. (Offenders who have $500.00 or more are not indigent and should arrange to hire an attorney to prepare a simple will if they do not want to use the packet or prepare a handwritten will.) SLP

4. I do not desire a will. _____

C. The attorney(s) handling my execution or stay and/or appeal is:

1. M. C. Gross

2. SAN ANTONIO TEXAS

3. _____

D. I am also aware that a relative or bona fide friend can request, within 48 hours, delivery of the remains of an executed offender. If executed, it is my request that my remains be delivered or handled by: STATE OF TX / T.D.C. Burial NEXT DAY

Whose relationship to me is that of _____, whose address is _____, telephone number _____.

_____
SIGNATURE OF OFFENDER

_____
DATE

_____
WITNESS **(PRINT)**

_____
WITNESS **(PRINT)**

cc: Director's Office
Warden's Office, Huntsville Unit
Public Information

**** ORIGINAL REMAINS ON POLUNSKY UNIT UNTIL DAY OF SCHEDULED EXECUTION.**

TO: ALL CONCERNED **DATE:** February 05, 2004

FROM: WARDEN'S OFFICE **SUBJECT:** DISPOSAL OF PROPERTY

I, Offender Scott L. Panetti, TDCJ # 999164 have made arrangements with MOM & DAD who lives at Livingston TX to pick up my personal property.

I have $ 50.49 in my Trust Fund Account as of 22JAN04, and would like it to be handled as follows:

LOUIS J. PANETTI
P.O. BOX 1202
LIVINGSTON TX 77351

Scott L. Panetti
OFFENDER NAME (PRINT)

Scott L. Panetti
OFFENDER SIGNATURE

22 JAN 04
DATE

WITNESS: (PRINT)

WITNESS: (PRINT)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE-ID
POLUNSKY UNIT

OFFENDER NAME AND NUMBER **Panetti, Scott # 999164**

LAST MEAL REQUEST

Hot buttered popcorn cold (welchs type) grape juice
SMOKED VENISON BACKSTRAPS and turkey breast in Lemon butter
garlic sause Lemon butter Hoilday giblet gravy bread
crumb bread dressing
cheese tray with cranburry fuit salad
Blue berry pie with whipped cream
coffee
(1) Panetela ciger → Fresh preferd
Honduran —
NO i repete
NO CUBAN
Cigars

CLOTHING SIZE

I wear western cloth

PANT SIZE: 34 waist / 36 Length

SHIRT SIZE: 44

SHOES: 12 1/2

DOUG DRETKE, DIRECTOR – CORRECTIONAL INSTITUTIONS

OFFENDER NAME/NUMBER: Panetti, Scott #999164

EXECUTION DATE: February 5, 2004

OFFENDER SIGNATURE: Scott Panetti

A. I have been advised that pursuant to Article 43.20, relatives or friends requested by the condemned offender, who are eligible under the following criteria may be allowed to witness the execution of an offender sentenced to death. The relatives or friends may not exceed five (5) in number. However, a spiritual advisor to the condemned offender may be allowed to witness in addition to the five (5) offender witnesses. The spiritual advisor must be a bonafide pastor or comparable official of the church of the condemned offender's elected religion.

1. M.C. Gross – 106 S. St. Mary St. Suite 260, San Antonio, TX 78205
2. Yvonne Panetti – N. 1009 Marshall, Sheldon, WI
3. Louis Panetti – N. 1009 Marshall, Sheldon, WI
4. Karin Eberhart - Switzerland
5. Tom Panetti – W. 14536 CTH MM, Sheldon, WI
6. (SPIRITUAL ADVISOR)

B. I am further advised that the services of an attorney can be provided free of charge to prepare a simple will so I may dispose of my worldly possessions. I have indicated my desires by initialing one of the following:

1. The disposition of my estate is complex and could not be handled by a simple will; therefore, I have made my own arrangements. ____

2. Disposition of my worldly possessions is covered by an existing will. ____

3. Services of an attorney are required to assist me in preparation of a simple will. (Offenders who have $500.00 or more are not indigent and should arrange to hire an attorney to prepare a simple will if they do not want to use the packet or prepare a handwritten will.) ____

4. I do not desire a will. SL

1

C. The attorney(s) handling my execution or stay and/or appeal is:

1. M.C. Gross – 106 S. St. Mary St. Suite 260, San Antonio, Texas 78205

2.

3.

D. I am also aware that a relative or bona fide friend can request, within 48 hours, delivery of the remains of an executed offender. If executed, it is my request that my remains be delivered or handled by:
T.D.C.J. Burial although subject to change upon desire of family members
Whose relationship to me is that of Father Mother,
whose address is Livingston TX,
telephone number .

P.O. box 1202
77351

SIGNATURE OF OFFENDER February 6:19

22 JAN 04
DATE

Mayor S. Miller
WITNESS (PRINT)

M. J. Richie
WITNESS (PRINT)

cc: Director's Office
Warden's Office, Huntsville Unit
Public Information

**** ORIGINAL REMAINS ON POLUNSKY UNIT UNTIL DAY OF SCHEDULED EXECUTION.**

TO: ALL CONCERNED **DATE:** **February 5, 2004**

FROM: WARDEN'S OFFICE **SUBJECT:** DISPOSAL OF PROPERTY

I, Offender Scott L. Panetti , TDCJ #999164 have made arrangements with Louis & Yvonne Panetti who lives at N. 1009 Marshall, Sheldon WI to pick up my personal property.

I have $ 50.49 in my Trust Fund Account as of 01/22/04 , and would like it to be handled as follows: Louis Panetti.

Scott L. Panetti
OFFENDER NAME **(PRINT)**

Scott L Panetti
OFFENDER SIGNATURE

22 JAN 04
DATE

Major S Miller
WITNESS: **(PRINT)**

Lt. J. Richie
WITNESS: **(PRINT)**

TEXAS DEPARTMENT OF CRIMINAL JUSTICE-ID
POLUNSKY UNIT

OFFENDER NAME AND NUMBER Panetti, Scott #999164

LAST MEAL REQUEST

Hot buttered popcorn / cold grape juice / coffee

Smoked venison back strap and turkey breast in

Lemon butter / garlic sauce / lemon butter / holiday

Giblet gravy bread / crumb bread dressing / cheese

Tray with cranberry fruit salad / blue berry pie with

Whipped cream

(1) Panatela cigar (prefer fresh Honduran no Cuban

Cigar)

CLOTHING SIZE

PANT SIZE: 34 waist / 36 length

SHIRT SIZE: 44

SHOES: 12 1/2

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

PROGRAMS & SERVICES DIVISION

Polunsky Unit

Chaplaincy Department

Religious Orientation Statement

(The following statement of religious preference is offered as an attempt to clarify the religious beliefs and obligational practices of committed offenders. It is intended to inform TDCJ staff of any special needs related to personal faith in order to provide appropriate considerations whenever possible.)

"I Scott Louis ranahan Panetti TDCJ # 999-164
(offender's name)
identify my religious beliefs as the following:" *(Circle one)*

1. Roman Catholic
2. Christian (Non Roman Catholic)
3. Jewish
4. Muslim
5. Native American
6. Other (please identify) Evangelical Christian

(In the case of some of the above categories, a more specific description of the religion may be appropriate.)

"I further identify myself as Preacher of "good news" "

"The following individual is my 'spiritual advisor:' Jesus Christ
His Holy Spirit
God

Telephone # _____

"I request a visit with my above named spiritual advisor to take place at the Huntsville Unit, pending administrative approval." ☐ Yes ☒ No

"In witness whereof, I have hereto set my hand this 22 day of JAN (month) 04 (year)."

Scott Louis Panetti 22 JAN 04
Offender's signature *Date*

Thomas Cole 1-22-04
Chaplain's signature *Date*

COLE

cc: Director of Chaplains
Unit Warden
Huntsville Unit Chaplain
Offender File